REMARKS

Reconsideration of the above-identified patent application in view of the amendment above and the remarks below is respectfully requested.

No claims have been canceled or added in this paper. Claims 1, 2, 14 and 15 have been amended in this paper. Therefore, claims 1-19 are pending and are under active consideration.

Claim 14 stands objected to for the following reason:

Claim 14, a device claim, depends from Claim 15, a method claim. It appears to be a typographical error. For purposes of this Office Action, it is assumed that Claim 14 depends from Claim 13. Appropriate correction is required.

In response to the foregoing objection, Applicants have amended claim 14 so that it depends from claim 13, instead of claim 15. Accordingly, the objection has been overcome and should be withdrawn.

Claims 1 and 15 stand rejected under 35 U.S.C. 102(b) "as being anticipated by U.S. Patent No. 5,048,512 to Turner et al." In support of the rejection, the Patent Office states the following:

Turner discloses a gastrostomy tube protector having a clip 1, medical tube 5, bore 7 and tubing storage cavity 10. See Figures 1-3 and cols. 2-4.

Applicants respectfully traverse the foregoing rejection. Claim 1 has been amended herein and now recites "[a] device for externally retaining a medical tube against a patient, said medical tube having a distal portion and a proximal portion, said distal portion being disposed within the patient and terminating in a distal end, said proximal portion extending externally from the patient and terminating in a proximal end, said device comprising a clip, said clip comprising a pair of end walls, an upper wall, a lower wall and a pair of open sides, wherein said pair of end walls, said upper

wall and said lower wall together define a tubing storage cavity and wherein one of said end walls is shaped to include a bore, said bore being dimensioned to receive a length of the proximal portion of the medical tube therethrough, with the remainder of the proximal portion being retained by said tubing storage cavity."

Thus amended, claim 1 is neither anticipated by nor rendered obvious over <u>Turner et al.</u> for at least the reason that <u>Turner et al.</u> does not teach or suggest a device that comprises, among other things, a clip comprising a pair of end walls, an upper wall, a lower wall and a pair of open sides, wherein said pair of end walls, said upper wall and said lower wall together define a tubing storage cavity and wherein one of said end walls is shaped to include a bore. Instead, <u>Turner et al.</u> discloses a belt that comprises a hingedly connected flap that may be sealed against the remainder of the belt to define a pocket for holding a length of tubing.

Claim 15 has also been amended herein and now recites "[a] method for externally retaining a medical tube against a patient, said medical tube having a distal portion and a proximal portion, said distal portion being disposed within the patient and terminating in a distal end, said proximal portion extending externally from the patient and terminating in a proximal end, said method comprising the steps of:

(a) providing a retaining device comprising a clip, said clip comprising a pair of end walls, an upper wall, a lower wall and a pair of open sides, wherein said pair of end walls, said upper wall and said lower wall together define a tubing storage cavity and wherein one of said end walls is shaped to include a bore, said bore being dimensioned to receive a length of the proximal portion of the medical tube therethrough, with the remainder of the proximal portion being retained by said tubing storage cavity;

- (b) advancing the proximal portion of the medical tube through said bore in said clip; and
- (c) retaining the remainder of the proximal portion of the medical tube using said tubing storage cavity."

Thus amended, claim 15 is neither anticipated by nor rendered obvious over <u>Turner et al.</u> for at least the same type of reasons given above in connection with claim 1.

Accordingly, for at least the above reasons, the foregoing rejection should be withdrawn.

Claims 16-19 have been allowed.

Claims 2-14 stand objected to "as being dependent upon a rejected base claim, but would be allowable if rewritten in independent form including all of the limitations of the base claim and any intervening claims."

In response to the foregoing objection, claim 2 has been rewritten in independent form, claims 3-14 depending directly or indirectly from claim 2. Accordingly, the foregoing objection has been overcome and should be withdrawn.

In conclusion, it is respectfully submitted that the present application is now in condition for allowance. Prompt and favorable action is earnestly solicited.

If there are any fees due in connection with the filing of this paper that are not accounted for, the Examiner is authorized to charge the fees to our Deposit Account No. 11-1755. If a fee is

required for an extension of time under 37 C.F.R. 1.136 that is not accounted for already, such an extension of time is requested and the fee should also be charged to our Deposit Account.

Respectfully submitted,

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